2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 24, 2006 08:00 AN Secretary of State DOCUMENT #L17292 1. Entity Name CANDITO TWO, INC. Principal Place of Business Mailing Address %JOSEPH P. CANDITO 2626-3 E TAMIAMI TRL 2626-3 E TAMIAMI TR NAPLES, FL 34112 NAPLES, FL 34112 01112006 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 65-0160599 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE CANDITO, JOSEPH P., JR., 2000 SANDPIPER ST NAPLES, FL 34102 IN THIS SPACE The second secon 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE CANDITO, JOSEPH P. SR. NAME STREET ADDRESS 2550 10TH STREET N CITY-ST-ZIP NAPLES, FL 34103 n TITLE CANDITO, PATRICIA NAME STREET ADDRESS 2000 SANDPIPER ST CITY-ST-ZIP NAPLES, FL 34102 TITLE CANDITO, JOSEPH P. JR. 2000 SANDPIPER ST STREET ADDRESS DO NOT WRITE CITY-ST-ZIP NAPLES, FL 34102 IN THIS SPACE TITLE CANDITO, LYDIA STREET ADDRESS 2550 10TH ST. NORTH CITY-ST-ZIP NAPLES, FL 34103 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2016.06

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FILED